## COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) and POWER OF ATTORNEY

	Declaration Submitted with Initial Filing					
	OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)					
First COMF Appli Filing Grou	ney Docket Number Named Inventor: PLETE IF KNOWN cation Number: Date: P Art Unit: hiner Name:	er: 136.169 Christian Collette				
As a b	elow named inventor, I	hereby declare that:				
My res	sidence, mailing address,	and citizenship are as stated bel	ow next to my name.			
I belie	ve I am the original, first are listed below) of the	and sole inventor (if only one na subject matter which is claimed an	ame is listed below) or an orind for which a patent is sough	ginal, first and joint t on the invention er	inventor (if plural titled:	
	Servi	er for the Control of Telecommu Using the Short Messages				
I acknown continue the na	by state that I have revided by any amendment solution-in-part application tional or PCT international by claim foreign priority rate, or 365(a) of any PC	as United S and was amended on _  iewed and understand the conte pecifically referred to above.  close information which is mate s, material information which be al filing date of the continuation-in benefits under 35 U.S.C. 119(a)- CT international application which	ints of the above-identified s rial to the patentability as do came available between the f -part application.  (d) or 365(b) of any foreign designated at least one cou	if applicable).  pecification, includir  efined in 37 CFR 1  iling date of the pric  application(s) for pa	ng the claims, as .56, including for or application and tent or inventor's United States of	
Americ or any	ca, listed below and have PCT international applic	also identified below, by checkin ation having a filing date before the	g the box, any foreign applica hat of the application on which	priority is claimed.	entor's ceruncate,	
	Foreign Application(s)			Priority Not Claimed	Certified Copy Attached?	
	99 09553	France	July 22, 1999		☐ Yes ☑No	
	(Number)	(Country)	(Foreign Filing Date)			
					☐ Yes ☐ No	
	(Number)	(Country)	(Foreign Filing Date)			
	_				☐ Yes ☐ No	
,	(Number)	(Country)	(Foreign Filing Date)			
□ Add	litional foreign application	numbers are listed on a supplem	nental priority data sheet PTO	/SB/02B attached he	ereto:	
I here!	by claim the benefit unde	r 35 U.S.C. 119(e) of any United	States provisional application(	s) listed below.		
	(Application Number) (Filing Date)		g Date)	Additional provision numbers are listed of supplemental priority	on a	

PTO/SB/02B attached hereto.

## COMBINED DECLARATION – Utility or Design Patent Application and POWER OF ATTORNEY

(Application Number) (F	Filing Date)	
As a below-named inventor, I hereby appoint the register prosecute this application, and to transact all business in the	red practitioners named below as my/our attomey(s) or agent(s) to Patent and Trademark Office connected therewith:	
James E. Nilles, Reg. No. 16,663 Lisa M. Gehrke, Reg. No. 38,888 Stephen Michael Patton, Reg. No. 36,235 Matthew M. Eslami, Reg. No. 45,488	Thaddeus C. Stankowski, Reg. No. 45,522 Matthew C. Loppnow, Reg. No. 45,314 Lisa A. Brzycki, Reg. No. 40,926	
Direct all telephone calls to James E. Nilles at telephone num Direct all correspondence to: James E. Nilles NILLES & NILLES, S.C. Firstar Center, Suite 2000 777 East Wisconsin Avenue Milwaukee, WI 53202-5345	nber (414) 276-0977, facsimile number (414) 276-0982.	
belief are believed to be true; and further that these statemer	knowledge are true and that all statements made on information and hts were made with the knowledge that willful false statements and the th, under 18 U.S.C. 1001 and that such willful false statements may thereon.	
Full name of Sole or First Inventor:	☐ A petition has been filed for this unsigned inventor	
Given Name (first & middle [if any]) and Family Name or Surr	name: Christian Collette	
Inventor's Signature:	Date:	
Residence (city, state, country): Verson, France	Citizenship: French	
Mailing Address: 28, avenue des Coteaux		
(city, state, zip, country): F-14790 Verson, France		
Full name of Second Inventor, if any:	☐ A petition has been filed for this unsigned inventor	
Given Name (first & middle [if any]) and Family Name or Surr	name:	
Inventor's Signature:	Date:	
Residence (city, state, country):	Citizenship:	
Mailing Address:		
(city, state, zip, country):		
Full name of Third Inventor, if any:	☐ A petition has been filed for this unsigned inventor	
Given Name (first & middle [if any]) and Family Name or Surr	name:	
Inventor's Signature:	Date:	
Residence (city, state, country):	Citizenship:	
Mailing Address:		
(city, state, zip, country):		

G:\Data\CLIENT\136\169\DECLARE.doc